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Suite 3400 One First Canadian Place  
P.O. Box 130  
Toronto Ontario  
M5X 1A4

Tel 416.777.7490  
Fax 416.863.1716

**FAX No.** 1-571-273-8300

**FROM** William B. Vass

**PHONE No.**

**LAWYER No.** 1217 **FILE No.** 50319-20

**DATE** October 19, 2007

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This is the first page of 10

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**MESSAGE**

**Re:** U.S. Application No. 10/709,298  
**Filed:** April 27, 2004  
**First Named Inventor:** Simpson, Todd Garrett

**Attached:** Transmittal Form  
 Fee Transmittal Form  
 Supplemental Information Disclosure Letter  
 Form PTO/SB08A IDS by Applicant  
 Credit Card Payment Form

DMSTORLegal05031900020569540v1

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PTO/SB/21 (09-06)

Approved for use through 06/31/2007. OMB 0651-0031

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 9

Application Number

10/709,298

Filing Date

April 27, 2004

First Named Inventor

Simpson, Todd Garrett

**RECEIVED****CENTRAL FAX CENTER**

Art Unit

3625

Examiner Name

Mila Airapetian

**OCT 19 2007**

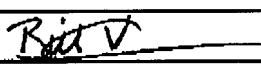
Attorney Docket Number

50319-20

**ENCLOSURES (Check all that apply)**

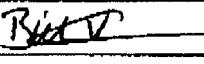
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Supplemental Disclosure Statement by Applicant
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Bennett Jones LLP, Customer Number 23971		
Signature			
Printed name	William B. Vass, Bennett Jones LLP, Customer No. 23971		
Date	October 19, 2007	Reg. No.	36,416

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	William B. Vass, Regn. No. 36,416	Date	October 19, 2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL  
For FY 2005** Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

65.00

**Complete If Known**

Application Number

10/709,298

Filing Date

April 27, 2004

First Named Inventor

Simpson, Todd Garrett

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Examiner Name

Mila Airapetian

Art Unit

3625

Attorney Docket No.

50319-20

OCT 19 2007

**METHOD OF PAYMENT (check all that apply)** Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_ Deposit Account Deposit Account Number: 02-2057 Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

 Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Small Entity Fee (\$)
- 20 or HP =	0	0	0	50 25

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
- 3 or HP =				200 100

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =		/ 50 =	(round up to a whole number) x	=

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)

Other (e.g., late filing surcharge): Late Filing Surcharge for Prior Art 65.00

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) 36,416	Telephone 416-863-1200
Name (Print/Type)	William B. Vass, Bennett Jones LLP		Date October 19, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Our File: 50319-0020/WBV

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****In the Matter of Patent Application:**

Serial No. : 10/709,298  
Applicant : Simpson et al.  
Filing Date : April 27, 2004.  
Title : METHOD AND SYSTEM OF PROVIDING LOCATION SENSITIVE  
BUSINESS INFORMATION TO CUSTOMERS  
Art Unit : 3625  
Examiner : Mila Airapetian

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***SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT***

To: Commissioner of Patents  
United States Patent and Trademarks Office  
Washington, D.C. 20231

Dear Sir:

Pursuant to 37 CFR 1.56 and 1.97-1.98, Applicants note herewith various references for the Examiner's consideration. The references were cited in the corresponding International Application in the International Search Report August 1, 2006.

A completed form 1449B/PTO listing the references thereon is enclosed herewith along with a copy of the International Search Report.

It is believed that the fee for this submission is \$65.00 and we attach Credit Card payment form PTO-2038 in this regard.

10/23/2007 HDESTA1 00000096 10709298

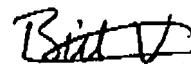
01 FC:1999

65.00 0P

- 2 -

Should the Examiner have any questions or wish to discuss further this matter, please contact the Applicant's representative Bill Vass at (416) 777-7490.

Respectfully submitted,  
**SIMPSON et al.**



William B. Vass  
Registration No. 36,416

October 19, 2007

Toronto, Ontario

CANADA

DMSTORLegal\030319\00020\369414v1